•	، سنج.				•				10	0/	916	,208	
											vor Docket Number .		
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003								80211FOD					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER		
Ŧ	OTAL CLAIMS		14				1	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			[4minus 20=		. 0			X\$ 9=	0	OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =		. 0			X43= 0		OR	X86=		
MI	JLTIPLE DEPEN	NDENT CLAIM PI	RESENT			114		+145=	1	OR	+290=		
If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	. 385	OR	TOTAL		
CLAIMS AS AMENDED - PART II										OR	OTHER SMALL		
NT A T		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total .	.12	Minus	-20	9	- /		X\$ 9=		OR	X\$18=		
	Independent	. 2	Minus	3	3	= /		X43=		OR	X86=		
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT	CLAIM	_/□_	1	+145=		OR	+290=		
3/7/5					,	Į	TOTA	4	OR	TOTAL			
(Column 1) (Column 2) (Column 3)						*	ADDIT. FE	ε	Tõũ	ADDIT. FEE	L		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 12	Minus	" J	0	= 🔿		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF ML	Minus	SHO SHOENT	CLAIM	-0		X43=		OR	X86=		
۳	PIRST PRESE	INTERIOR OF REC	CHIP CE OEI	CHOCK	COPAIN		' [+145=		OR	+290=		
								TOTA	E	OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		= .		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		2	lt	X43=		OR	X86=		
٩.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						lŀ		+		+290=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
	"If the "Highest Number Previously Paid For" (N THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE This "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 10/03)

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